

03-07-02

4

J1051 U.S. PTO  
03/06/029600 Great Hills Trail  
Suite 300WAustin  
Texas 78759T: 512-794-3600  
F: 512-794-3601Newport Beach, CA  
San Jose, CA  
San Francisco, CAskjerven morrill  
macpherson LLP

Attorney Docket No.: SP-5827 US

March 6, 2002

Box Patent Application  
Commissioner For Patents  
Washington, D. C. 20231J1040 U.S. PTO  
10/091783  
03/06/02

Enclosed herewith for filing is a patent application, as follows:

Inventors: Karthik Balakrishnan  
Poonacha P. Kongetira  
Sanjay Patel  
Ketaki Rao

Title: FAST INSTRUCTION DEPENDENCY MULTIPLEXER

|    |   |
|----|---|
| X  | Return Receipt Postcard   |
| X  | This Transmittal Letter (in duplicate)  |
| 12 | Page(s) Specification (not including claims)  |
| 9  | Page(s) Claims  |
| 1  | Page Abstract   |
| 8  | Sheet(s) of Drawings: Fig. 1; Fig. 2A; Fig. 2B; Fig. 3A; Fig. 3B; Fig. 3C; Fig. 4A; Fig. 4B |
| 3  | Page(s) Declaration For Patent Application and Power of Attorney                            |
| 1  | Page(s) Recordation Form Cover Sheet (in duplicate)   |
| 1  | Page(s) Assignment  |

**CLAIMS AS FILED**

| For          | Number<br>Filed |       | Number<br>Extra |   | Rate    |   | Basic Fee              |
|--------------|-----------------|-------|-----------------|---|---------|---|------------------------|
| Total Claims | 56              | -20 = | 36              | x | \$18.00 | = | \$ 740.00<br>\$ 648.00 |

|                    |   |      |   |   |         |   |         |
|--------------------|---|------|---|---|---------|---|---------|
| Independent Claims | 3 | -3 = | 0 | x | \$84.00 | = | \$ 0.00 |
|--------------------|---|------|---|---|---------|---|---------|

☐ Fee of \_\_\_\_\_ for the first filing of one or more multiple dependent claims per application

☐ Fee for Request for Extension of Time

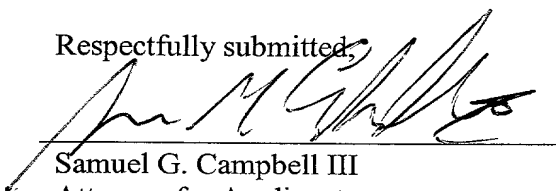
Please make the following charges to Deposit Account 19-2386:

|  |             |
|--|-------------|
| <input checked="" type="checkbox"/> Total fee for filing the patent application in the amount of   | \$ 1,388.00 |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account 19-2386. |             |

EXPRESS MAIL LABEL NO:

EL 830 059 372 US

Respectfully submitted,

  
 Samuel G. Campbell III  
 Attorney for Applicants  
 Reg. No. 42,381  
 [Phone: (512) 794-3600]  
 [Fax: (512) 794-3601]